

Imaging Services

Please check location:

- Baylor All Saints Imaging Center (BASIC)**
- Baylor All Saints Medical Center (BASMC)**
- Baylor Medical Center at Southwest Fort Worth (BSW)**

Scheduling Instructions for Patient:

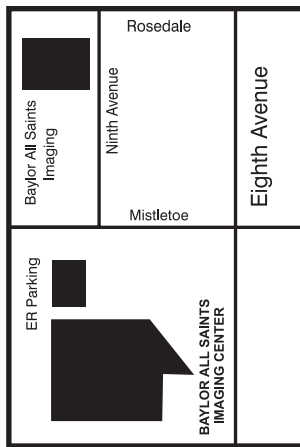
- Central Scheduling to contact patient** (simply fax this order to Central Scheduling and we will schedule the patient for you)
- Patient will contact Central Scheduling**

***The following fields must be complete or the patient will be delayed or rescheduled:
 Date, Time, Patient Name, Physician Signature, Procedure and Diagnosis**

*Date: _____ *Time: _____ am / pm *Order valid for ninety (90) days
 *Patient Name: _____ Date of Birth: _____ Patient Phone: _____
 Physician Printed Name: _____ *Physician Signature: _____
 Appointment: Date _____ Time _____ am / pm ***Arrive 30 minutes prior to procedure**

SCHEDULING INFORMATION

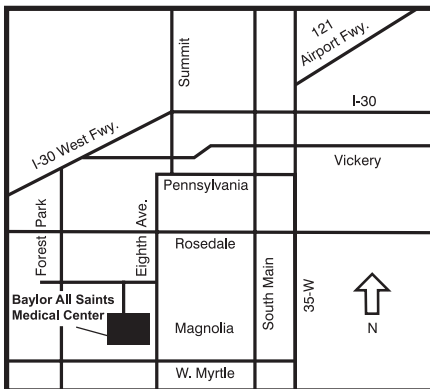
<input type="checkbox"/> CT/CTA <input type="checkbox"/> with IV contrast <input type="checkbox"/> with & without IV contrast <input type="checkbox"/> without IV contrast			
All Locations; CTA Coronary at BASMC Only	*Procedure Requested	CPT Code	*Diagnosis/Chief Complaint ICD-9 Code
<input type="checkbox"/> MRI/MRA <input type="checkbox"/> with & without contrast <input type="checkbox"/> without contrast			
All Locations; Breast MRI and MRI-Guided Breast Biopsy at BASIC Only	*Procedure Requested	CPT Code	*Diagnosis/Chief Complaint ICD-9 Code
Nuclear Medicine			
BASMC and BSW Only	*Procedure Requested	CPT Code	*Diagnosis/Chief Complaint ICD-9 Code
Ultrasound			
All Locations; Segmental Pressures at BASMC Only	*Procedure Requested	CPT Code	*Diagnosis/Chief Complaint ICD-9 Code
Other Procedures			
Bone Density at BASIC ONLY; Thoracentesis and Paracentesis at BASMC Only	*Procedure Requested	CPT Code	*Diagnosis/Chief Complaint ICD-9 Code
Diagnostic			
All Locations; Walk-In	*Procedure Requested	CPT Code	*Diagnosis/Chief Complaint ICD-9 Code
Interventional			
	*Procedure Requested	CPT Code	*Diagnosis/Chief Complaint ICD-9 Code



BAYLOR ALL SAINTS IMAGING CENTER

1701 West Rosedale Street, Fort Worth, Texas 76104
(817) 922-7780

X-ray, Fluoroscopy, Bone Density, CT, CTA, MR, MRA, MR Breast, and Ultrasound



BAYLOR ALL SAINTS MEDICAL CENTER AT FORT WORTH

1400 Eighth Avenue, Fort Worth, Texas 76104
(817) 927-6151

X-ray, Fluoroscopy, CT, CTA, MR, MRA, Nuclear Medicine, Ultrasound, Interventional Radiology, and other Radiology procedures



BAYLOR MEDICAL CENTER AT SOUTHWEST FORT WORTH

7100 Oakmont Boulevard, Fort Worth, Texas 76132
(817) 346-5746

X-ray, Fluoroscopy, CT, CTA, MR, MRA, Nuclear Medicine and Ultrasound

Exam Preparations

Barium Enema/IVP

You may pick up a prep kit from one of our locations, or you may purchase supplies at your drugstore and follow the instructions below:

One day prior to exam:

- * Limit intake to clear liquids only
- * Take 10 oz. magnesium citrate at 12:00 noon
- * Take 4 Dulcolax tablets at 4:00 pm
- * Nothing to eat or drink after midnight

On the morning of the exam:

- * Use a Dulcolax suppository

UGI/Small Bowel

Have a light evening meal. Nothing to eat or drink after midnight the night prior to your scheduled exam.

Ultrasound

1. *Obstetrics, Pelvic* – Drink 32 ounces of water one hour prior to appointment. Do not urinate until after exam.
2. *Abdomen* – Nothing to eat or drink after midnight the night prior to the exam.

CT

Oral contrast is to be picked up from one of our locations at least one day prior to your scheduled exam.

MR

No prep required. Please refrain from wearing clothing with metal closures.

Interventional Radiology

Your referring physician will provide you with instructions.